

CLIMATE ACTION FUND

BRADFORD SOUTH

GRANT APPLICATION FORM 2020-21

PLEASE NOTE THE CLOSING DATE FOR APPLICATIONS IS

Friday 23rd April 2021

The guidance notes must be read before you complete this application

| **Q1. Your details**  |
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| Project Name |  |
| Organisation Name |  |
| Organisation Main Contact |  |
| Address |  |
| Postcode |  |
| Landline telephone number |  |
| Mobile telephone number |  |
| Email |  |

**Please tick the box if you agree to your details being shared with other parts of the Council for climate environment and sustainability purposes?** |

| **Q2. What type of organisation is your group? If you are not a constituted group, please state this.**  |
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| **Q3. Describe your project by demonstrating how it would reduce carbon emissions and tackle climate change and how the local community will be involved.** |
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| **Q4. How will you measure the effectiveness of the project?** |
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| **Q5. What will be the timeline of the project?** |
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| **Q6. Please indicate how much money you are applying for? Maximum amount is £5,000. However, if you have an inspiring project that exceeds this amount, in the first instance please contact your Area Office to discuss your application.**  |
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| **Q7. Please provide a clear and accurate breakdown of how the money will be spent. You must submit 2 quotations for each item of expenditure.** |
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| **Breakdown of costs:** |
| **Item** | **Cost** |
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|  **Total Cost**  |  |
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| **Q8. If the total cost of your project is greater than the amount you are applying for, please tell us how you will fund the project. *i.e match funding, contribution in kind. If there are any other agencies involved with this project please list their names and contribution.* *(No more than 150 words)***  |
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| **Q9. How will you ensure you can deliver your project safely complying with relevant Covid safety guidance, including social distancing? If your application is successful you will need to submit a risk assessment prior to initiating work, if appropriate.** ***If you require assistance compiling this information, contact the Area Co-ordinators office on the number below.***  |
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| **By completing this section, you are confirming all the information on this application form is true and correct. You understand that Bradford Council may ask for more information at any stage of the application process or when the project is running. You also agree that you may be contacted to provide information for media use.**  |
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| **Name:****Signature:****Position:****Date:** |

| **You must submit the following with your application. \*if you are an organisation that requires these documents/policies.**  |
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| **Document** | **Attached (YES)** |
| Two quotations for each item of expenditure |  |
| Child Protection Policy\* |  |
| Vulnerable Adults Policy\* |  |
| Equal Opportunities Policy\* |  |
| Health & Safety Policy\* |  |

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**Send the completed application form and supporting documents to:**

**Bradford South Area Co-ordinator’s Office**

**Tel: 01274 431155**

**E-mail: bradfordsouthareaoffice@bradford.gov.uk**